

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		723	2/24
O.I.P.E. CLASSIFIER	R/L		5/17
FORMALITY REVIEW	P/B	679.5	4/25/71

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/23/71
2	6/1/71
3	11/14/70
4	11/16/71
5	11/24/71
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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